SEC 1972 Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB (6-02)control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

SEC Mail Processing Section

JAN 26 FUUY

Washington, DC 111

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response... 1

SEC USE ONLY			
Prefix		Serial	
DATE RECEIVED			

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)

<u>M01938 Zion Church in Jesus Christ</u>

Filing Under (Check box(es) that apply):

[X] Rule 504 [] Rule 505 [] Rule 2019 [] Section 4(6) [] ULOE

Type of Filing: [X] New Filing

[] Amendment

THOMSON REUTERS

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer



Name of Issuer ([] check if this is an amendment and name has changed, and indiciate change.)

BDM Mortgage Services, Inc.

Address of Executive Offices (Including Area Code)

(Number and Street, City, State, Zip Code)

Telephone Number

21601 Devonshire Blvd. #116, Chatsworth, CA 91311

(818) 708-8889

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)

Type of Business Organiz [X] corporation	eation [] limited partnership, already formed [] other (please specify):
[] business trust	[] limited partnership, to be formed
	Month Year
Actual or Estimated Date	of Incorporation or Organization: [0]8] [9]5] [X] Actual [] Estimated
Jurisdiction of Incorporation	on or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [C][A]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[x] Executive Officer	[x] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)			.
Aranda, D	aniel			
Business or Residence	e Address (Number and Street	, City, State, Zip Coo	de)	
21601 Dev	onshire Blvd., #116, Cha	atsworth, CA 91	311	
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Business or Residence	e Address (Number and Street	, City, State, Zip Coo	ie)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)			·
Business or Residenc	e Address (Number and Street,	City, State, Zip Coo	le)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)			· · · · · · · · · · · · · · · · · · ·
Business or Residenc	e Address (Number and Street,	City, State, Zip Cod	le)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [General and/or Managing Partner
Full Name (Last name	first, if individual)			
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	e)	
Check Box(es) that	[] Promoter [] Beneficial	[] Executive	[] Director []	General and/or

Apply:		Owner	Of	icer			Mana Partn	
Full Name (Last nam	e first, if individ	ıal)						···
Business or Residen	ce Address (Nu	mber and Stree	t, City, Sta	e, Zip Co	ode)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner		ecutive icer	[]	Director	[] Gene Mana Partn	
Full Name (Last nam	e first, if individu	ıal)				· , , , , , , , , , , , , , , , , , , ,		
Business or Residen	ce Address (Nu	mber and Stree	t, City, Stat	e, Zip Co	ode)			
(Use bl	ank sheet, or o	copy and use a	idditional (opies o	f this sh	eet, as r	necessa	ry.)
	 , .	B. INFORMAT	ION ABOU	T OFFE	RING			
1. Has the issuer sol offering?		suer intend to s						es No x] []
2. What is the minim		· ·		_			_	1,000.00 es No
3. Does the offering p	-						[]	x][]
 Enter the informati directly or indirectly, connection with sales person or agent of a the name of the brok persons of such a bro only. 	any commissior s of securities in broker or deale er or dealer. If n	n or similar remo the offering. If r registered with nore than five (!	uneration fo a person to the SEC a 5) persons	r solicita be listed nd/or with to be liste	ition of p d is an as th a state ed are as	urchaser ssociated or state ssociated	s in 1 :s, list I	
Full Name (Last name	e first, if individu	al)				·		
Business or Residenc	ce Address (Nur	nber and Stree	t, City, Stat	e, Zip Co	de)			
Name of Associated E	Broker or Deale	r			 			· · · · · · · · · · · · · · · · · · ·
States in Which Perso					sers			<u></u>
(Check "All States			•		rp=1 -]] All S	
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Full Na	ame (La	st name	first, if i	ndividua	1)					. ,		• ,
Busine	ess or R	esidence	- Addres	ss (Num	ber and	Street, C	City, Stat	e, Zip Co	ode)			
Name	of Asso	ciated B	roker or	Dealer		·· · =						
								t Purcha	sers			
(Che	ck "All	States	or ch	eck ind	lividual	States)	• • • • • • • • • • • • • • • • • • • •		[] All S	Itates
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	C. (FFERIN	IG PRIC	E, NUN	IBER O	F INVES	TORS, E	XPENS	ES AND	USE OF	PROCE	EDS
								11				

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt Fractional Loan Interest	\$ 239,000.00	\$239,000.00
Equity	\$	\$
[] Common [] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify).	\$	\$
Total	\$239,000.00	\$239,000.00

Aggregate

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

Accredited Investors	Number Investors	Dollar Amount of Purchases
Non-accredited Investors	8	\$239,000.00
Total (for filings under Rule 504 only)	8	\$ 239,000.00

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold	
Rule 505		_\$	
Regulation A		_\$	
Rule 504	tional Interest	\$1,733,500_00)
Total		\$	
Utal		. 	

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$
Printing and Engraving Costs	[]\$0
Legal Fees	[]\$0
Accounting Fees	[]\$0
Engineering Fees	[]\$0
Sales Commissions (specify finders' fees separately)	[]\$
Other Expenses (identify)	[]\$0
Total	[]\$0

\$239,000.00

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payments of Officers, Directors, & Affiliates	Payments & To Others
Salaries and fees	•	[] \$ <u> </u>	[] _\$ <u> </u>
Purchase of real estate	·····	[] \$ <u> </u>	[] \$ <u> </u>
Purchase, rental or leasing and installation of mac and equipment	chinery	[] \$ <u> </u>	[] \$ <u>.</u> 0
Construction or leasing of plant buildings and facil	ities	[] \$ <u> </u>	[] _\$ <u> 0 </u>
Acquisition of other businesses (including the valusecurities involved in this offering that may be usexchange for the assets or securities of another inpursuant to a merger)	ed in ssuer	[] \$ <u> </u>	[] \$
Repayment of indebtedness		[] \$ 0	[] s 0
Working capital		[]	[] \$0
Other (specify): Investment in Trust Deeds	3	\$ <u>0</u>	[] \$ <u>239,000.</u> 00
		[] \$ <u>0</u> []	[] \$ <u> </u>
Column Totals		\$0	\$ 239,000.00
Total Payments Listed (column totals added)		[]\$23	39,000,00
D. FEDERA	AL SIGNATURE		
The issuer has duly caused this notice to be signed by filed under <u>Rule 505</u> , the following signature constitute: Securities and Exchange Commission, upon written reany non-accredited investor pursuant to paragraph (b)	s an undertaking by the iss quest of its staff, the inform	iuer to lumis	ก เช เทษ บ.ฮ.
· · · · · · · · · · · · · · · · · · ·			
Issuer (Print or Type)	S/gnature)	Da	
BDM Mortgage Services, Inc.	Title of Signer (Print or T	7	n 14, 2009
Name of Signer (Print or Type)	Tiple of Signer (Finite) 1	, po,	
Daniel Aranda	President		
ATT	ENTION		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes No
See Appendix, Column 5, for state response.	

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Name of Signer (Print or Type)	Title (Print or Ty	pe)
Name of Signer (Print or Type)	Title (Print or Ty	oe)

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-accinvestors (Part B-I	credited in State	· ·		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes -	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	

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